



CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: 08/26/2008 To: 10/19/2008
Mo Day Year Mo Day Year

1. Committee I.D. Number 150313-0	4. Candidate Last Name Committee to Elect Joseph Rivet	First Name Joseph	M.I. Rivet
2. Committee Name Committee to Elect Joseph Rivet	4a. Office Sought Including District # or Community Served (If applicable) To Be Determined Bay County	4b. County of Residence Bay	
5. Committee's Mailing Address 4542 Mocasa Ct. Bay City MI 48706 Area Code and Phone <u>(989) 671-2153</u> If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	6. Treasurer's Name & Residential Address JOSEPH RIVET 4542 MOCASA CT. BAY CITY, MI 48706 Area code & Phone <u>989 671-2153</u> Driver License # (Optional) _____		
7. Treasurer's Business Address 515 COLUM AVE BAY CITY, MI 48706 Area Code and Phone <u>989 895-4290</u>	8. Designated Recordkeeper's Name and Mailing Address (If the committee has a Designated Recordkeeper) Area Code and Phone _____ Driver License # (Optional) _____		

9. TYPE OF STATEMENT

9a. ☒ Pre-Election OR 9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> Primary | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Convention | <input type="checkbox"/> School |
| <input type="checkbox"/> Special | <input type="checkbox"/> Caucus |

Date of Election, Convention or Caucus

11/05/2008

Month Day Year

9c. ☐ Annual Statement (____ Coverage Year)

9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)

9e. ☐ Dissolution of Candidate Committee
Effective Date of Dissolution

Mon Day Year

By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement can not be waived.

10. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Recordkeeper JOSEPH RIVET

Type or Print Name

Signature

Date 10 25 08
Mo Day Year

Candidate Committee to Elect Joseph Rivet

Type or Print Name

Signature

Date 10 25 08
Mo Day Year

Authority granted under P.A. 368 of 1976



MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

1. Committee I.D. Number 150313-0

2. Committee Name Committee to Elect Joseph Rivet

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>5425.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>0.00</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>5425.00</u>	(18.) \$ <u>13033.26</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>5425.00</u>	(20.) \$ <u>13033.26</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>0.00</u>	(21.) \$ <u>550.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>3631.12</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>113.65</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>3744.77</u>	(23.) \$ <u>11674.64</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u>0.00</u>	(24.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>0.00</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>1737.90</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) +	<u>5425.00</u>	
15. SUBTOTAL Add Lines 13 and 14	(15.) =	<u>7162.90</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) -	<u>3744.77</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>3418.13</u> *	

NOTE: Direct contributions, in-Kind contributions, loans, expenditures and outstanding debts count against the \$1,000.00 Reporting Waiver threshold.
All required schedules must be included with this statement. *If your ending balance is negative, please recheck your math.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150313-0

2. Committee Name Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>1</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/27/2008</u> Name: <u>Ron Hansen</u> Address: <u>1615 Thunderbird</u> <u>Saginaw MI 48609</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>SPICA GROUP</u> Business Address <u>230 S. WASHINGTON BL. 48403</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	200.00	400.00
3. Contribution # <u>2</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/28/2008</u> Name: <u>Art Dore</u> Address: <u>P.O. Box 146</u> <u>Bay City MI 48707</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>DORE ASSOCIATES</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	100.00	200.00
3. Contribution # <u>3</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/02/2008</u> Name: <u>Bryan Wood</u> Address: <u>1818 Wilder</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Contractor</u> Employer <u>Geoffrey Seidlin WOOD CONTRACTING</u> Business Address <u>5801 W. Michigan Ave. 48017</u> <u>930 WAGNER ESSEXVILLE, MI 48036</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	500.00	1000.00
3. Contribution # <u>4</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/08/2008</u> Name: <u>Brian Redmond</u> Address: <u>11 Bay Shore Drive</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	90.00
Page Subtotal	830.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150313-0
2. Committee Name Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>5</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/08/2008</u> Name: <u>Doug Wirt</u> Address: <u>3405 Courtland</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>Geoffrey Seidlein</u> Business <u>5801 W. Michigan Ave.</u> Address <u>Lansing MI 48917</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100.00	200.00
3. Contribution # <u>6</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/11/2008</u> Name: <u>Frank Janca</u> Address: <u>435 River Dr.</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Geoffrey Seidlein</u> Business <u>5801 W. Michigan Ave.</u> Address <u>Lansing MI 48917</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	150.00	250.00
3. Contribution # <u>7</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/11/2008</u> Name: <u>Bill Washabaugh</u> Address: <u>401 Kelton</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business _____ Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100.00	200.00
3. Contribution # <u>8</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/13/2008</u> Name: <u>Rodney Gerard</u> Address: <u>3231 Bangor Rd.</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business _____ Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	15.00	45.00
Page Subtotal	365.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150313-0

2. Committee Name Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>9</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/15/2008</u> Name: <u>Tim Banaszak</u> Address: <u>27 Rivertrail</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # <u>10</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/15/2008</u> Name: <u>Bay County</u> Address: <u>515 Center Ave.</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	100.00	100.00
3. Contribution # <u>11</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/15/2008</u> Name: <u>Corinne Martin</u> Address: <u>605 W. Ohio</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	15.00	45.00
3. Contribution # <u>12</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/15/2008</u> Name: <u>Louis Meyette</u> Address: <u>4115 Shannon Place</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal	190.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

1. Committee I.D. Number 150313-0

2. Committee Name Committee to Elect Joseph Rivet

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<p>3. Contribution # <u>13</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/2008</u></p> <p>Name: <u>Ed Dore</u> Address: <u>3095 Sherwood</u> <u>Bay City MI 48706</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>PHOTO MANAGER</u> Employer <u>DONE GUTENBERG</u></p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	100.00	200.00
<p>3. Contribution # <u>14</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/2008</u></p> <p>Name: <u>Edna Kay Simons</u> Address: <u>1509 Third St.</u> <u>Bay City MI 48708</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	15.00	30.00
<p>3. Contribution # <u>15</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2008</u></p> <p>Name: <u>Mary Donnelly</u> Address: <u>613 Green</u> <u>Bay City MI 48708</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	30.00	45.00
<p>3. Contribution # <u>16</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2008</u></p> <p>Name: <u>Steve Wirt</u> Address: <u>196 Athlone Beach</u> <u>Bay City MI 48706</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	50.00	50.00
Page Subtotal		195.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
line 3a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 150313-0
2. Committee Name Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>17</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: Kurt Asbury Address: 2125 Sixth Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	60.00
3. Contribution # <u>18</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: George Augustyniak Address: 2840 Kaiser Rd., Rt 1 Pinnconning MI 48650 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	15.00	15.00
3. Contribution # <u>19</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: Patrick Beson Address: 1946 River Road Kawkawlin MI 48631 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	15.00	65.00
3. Contribution # <u>20</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: John Billette Address: 4780 Briarwood Ct. Auburn MI 48611 5. If over \$100.00 cumulative, please provide: Occupation <u>Civil Engineering</u> Employer <u>Civil Engineering</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100.00	200.00
Page Subtotal	160.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
line 3a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 150313-0
2. Committee Name Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>21</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Tim Boutell</u> Address: <u>855 S. Linwood Beach</u> <u>Linwood MI 48634</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>FIREHOUSE CARWASH</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	100.00
3. Contribution # <u>22</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Judy Brunner</u> Address: <u>208 Murphy</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	50.00
3. Contribution # <u>23</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Michelle Brya</u> Address: <u>11661 Millstone Drive</u> <u>Grand Ledge MI 48837</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>HUBBARD, FOX</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	100.00
3. Contribution # <u>24</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Dick Brzezinski</u> Address: <u>2513 25th Street</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	45.00
Page Subtotal	150.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
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3. Contribution # 25 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: Kim Connan Address: 706 Sidney Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	30.00
3. Contribution # 26 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: Mike Denay Address: 3052 W. Birch Dr. Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	60.00
3. Contribution # 27 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: Lynn Derck Address: 4286 Manke Drive Fairgrove MI 48733 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	60.00
3. Contribution # 28 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: Brian Elder Address: 900 Center Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
Page Subtotal	110.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150313-0
2. Committee Name Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>29</u> PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Friends of Don Tilley</u> Address: <u>617 Green Ave.</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	45.00	45.00
3. Contribution # <u>30</u> PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Friends of Jim Barcia</u> Address: <u>P.O. Box 775</u> <u>Bay City MI 48707</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	45.00
3. Contribution # <u>31</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Don Goulet</u> Address: <u>69 York</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	40.00
3. Contribution # <u>32</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Dennis Hayes</u> Address: <u>114 N. Sheridan</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	55.00
Page Subtotal	125.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150313-0

2. Committee Name Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>33</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Jerry Kaczynski</u> Address: <u>406 Seventh Street</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	55.00
3. Contribution # <u>34</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Licavoli Konnie</u> Address: <u>2160 Center Ave.</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>35</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Tim Kuhn</u> Address: <u>1490 Evelyn</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	80.00
3. Contribution # <u>36</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Bielawski Larry</u> Address: <u>901 S. Linwood Rd.</u> <u>Linwood MI 48631</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	15.00	15.00
Page Subtotal	110.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150313-0

2. Committee Name Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # <u>37</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u></p> <p>Name: <u>LeVasseur Paul</u> Address: <u>1680 E. Cody Estey Rd.</u> <u>Pinconning MI 48650</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	15.00	15.00
<p>3. Contribution # <u>38</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u></p> <p>Name: <u>Tony Pawalski</u> Address: <u>P.O. Box 556</u> <u>Pinconning MI 48650</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	15.00	15.00
<p>3. Contribution # <u>39</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u></p> <p>Name: <u>Art Pominville</u> Address: <u>P.O. Box 832</u> <u>Bay City MI 48707</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	15.00	15.00
<p>3. Contribution # <u>40</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u></p> <p>Name: <u>Rich Putt</u> Address: <u>4650 S. Auburn Rd.</u> <u>Auburn MI 48611</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>OPERATION</u> Employer <u>BAY COUNTY ROAD COMMISSION</u></p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	50.00	150.00
Page Subtotal		95.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 150313-0
2. Committee Name Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>41</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: Dave Quimby Address: 12760 Whisper Ridge Circle Freeland MI 48623 5. If over \$100.00 cumulative, please provide: Occupation <u>ACCOUNTANT</u> Employer <u>WEELANDM FITZGERALD</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100.00	200.00
3. Contribution # <u>42</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: Pat Race Address: 1004 N. Sheridan Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	15.00	35.00
3. Contribution # <u>43</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: Vicki Roupe Address: 3115 Kirkwood Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	15.00	30.00
3. Contribution # <u>44</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: Jerome Sarnowski Address: 1400 S. Warner Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	55.00
Page Subtotal	155.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150313-0

2. Committee Name Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # <u>45</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u></p> <p>Name: <u>Ed Shimabukuro</u> Address: <u>4538 Greenfield</u> <u>Bay City MI 48706</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	100.00	200.00
<p>3. Contribution # <u>46</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u></p> <p>Name: <u>Jane Smith</u> Address: <u>P.O. Box 695</u> <u>Bay City MI 48707</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	15.00	30.00
<p>3. Contribution # <u>47</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u></p> <p>Name: <u>Ron Tribula</u> Address: <u>4778 Main Street</u> <u>Millington MI 48746</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>PRINTING</u> Employer <u>RT. PRINTING</u></p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	50.00	100.00
<p>3. Contribution # <u>48</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u></p> <p>Name: <u>Dave Ventrone</u> Address: <u>1783 Maroba</u> <u>Linwood MI 48634</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	30.00	50.00
<p>Page Subtotal</p> <p>Grand Total of All Schedules 1A (Complete on last page of Schedule)</p>		195.00

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MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 150313-0

2. Committee Name Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>49</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Randy Wall</u> Address: <u>4374 Mocasa Ct</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	15.00	15.00
3. Contribution # <u>50</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Bill Weber</u> Address: <u>683 S. Linwood Beach Rd.</u> <u>Linwood MI 48634</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100.00	100.00
3. Contribution # <u>51</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Bill Wentworth</u> Address: <u>8290 Northport</u> <u>Brand Blanc MI 48439</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Business Owner</u> Employer <u>Geoffrey Seidlein APPLIC/MILLER LTD.</u> Business Address <u>5801 W. Michigan Ave.</u> <u>Lansing MI 48917</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	200.00	400.00
3. Contribution # <u>52</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Mary Whyte-Manor</u> Address: <u>609 Sidney</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	15.00	30.00
Page Subtotal	330.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150313-0

2. Committee Name Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 53 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: Gloria Wood Address: 354 Killarney Beach Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # 54 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: Jerry Zervan Address: 2720 W. Birch Run Road Birch Run MI 48417 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # 55 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/19/2008</u> Name: Rosenbrock Jason Address: 1401 N. Garfield Rd. Linwood MI 48634 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	15.00	15.00
3. Contribution # 56 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/21/2008</u> Name: Martin Hornacek Address: 609 Glenview Pinconning MI 48650 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	50.00
Page Subtotal		140.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 150313-0

2. Committee Name Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>57</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/24/2008</u> Name: <u>Mike Gray</u> Address: <u>5009 S. Fraser Rd.</u> <u>MI</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	45.00
3. Contribution # <u>58</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/24/2008</u> Name: <u>John Ostrander</u> Address: <u>3448 Northway Ct.</u> <u># 1</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	50.00
3. Contribution # <u>59</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/24/2008</u> Name: <u>Dhana Shrestha</u> Address: <u>2133 Heritage</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100.00	200.00
3. Contribution # <u>60</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/25/2008</u> Name: <u>Jason Deshano</u> Address: <u>2682 Old Beaver Rd.</u> <u>Kawkawlin MI 48631</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>owner</u> Employer <u>DESHANO EXCAVATING</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	100.00
Page Subtotal	200.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 150313-0

2. Committee Name Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>61</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/01/2008</u> Name: <u>Matt Filan</u> Address: <u>14224 Jefferies Place</u> <u>Midlothian VA 23114</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>Geoffrey Seidlin SELF-EMPLOYED</u> Business Address <u>5801 W. Michigan Ave.</u> <u>Lansing MI 48947</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	250.00	250.00
3. Contribution # <u>62</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/03/2008</u> Name: <u>Jeff Mayes</u> Address: <u>4297 Zander</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Supervisor</u> Employer <u>Bay County</u> Business Address <u>515 Center Ave.</u> <u>Bay City MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	200.00	200.00
3. Contribution # <u>63</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/06/2008</u> Name: <u>Dave LeRoux</u> Address: <u>P.O. Box 1324</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>owner</u> Employer <u>MOTOR FUEL DISTRIBUTION</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	100.00	100.00
3. Contribution # <u>64</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/07/2008</u> Name: <u>Don Scherzer</u> Address: <u>2046 Karl</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>Sawicki & Sons SPICER GROUP</u> Business Address <u>1521 W. Lafayette</u> <u>Detroit MI 48216</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	500.00	1000.00
Page Subtotal	1050.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 150313-0
2. Committee Name Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>65</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/13/2008</u> Name: <u>David Gregory</u> Address: <u>2231 Fraser Rd.</u> <u>Kawkawlin MI 48631</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>66</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/13/2008</u> Name: <u>James Washabaugh</u> Address: <u>5914 4 Mile Rd.</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>Mark Norton NORFOLK CONCRETE</u> Business Address <u>3683 Kawkawlin River Dr.</u> <u>Bay City MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	200.00	200.00
3. Contribution # <u>67</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/13/2008</u> Name: <u>Tom Washabaugh</u> Address: <u>232 Athlone Beach</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>Mark Norton NORFOLK CONCRETE</u> Business Address <u>3683 Kawkawlin River Dr.</u> <u>Bay City MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	200.00	200.00
3. Contribution # <u>68</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/16/2008</u> Name: <u>James Fabiano</u> Address: <u>P.O. Box 1907</u> <u>Mt. Pleasant MI 48804</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner/Partner</u> Employer <u>Jim Fabiano II FABIANO BROTHERS</u> Business Address <u>5816 Windy Gale</u> <u>Midland MI 48640</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	200.00	200.00
Page Subtotal	625.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 150313-0

2. Committee Name Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>69</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/16/2008</u> Name: <u>Joseph Fabiano</u> Address: <u>P.O. Box 1907</u> <u>Mt. Pleasant MI 48804</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner/Partner</u> Employer <u>Jim Fabiano II FABIANO BROTHERS</u> Business <u>5816 Windy Gale</u> Address <u>Midland MI 48640</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	200.00	200.00
3. Contribution # <u>70</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/16/2008</u> Name: <u>Jim Fabiano II</u> Address: <u>5816 Windy Gale</u> <u>Midland MI 48640</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Partner/owner</u> Employer <u>FABIANO BROTHERS</u> Business _____ Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	200.00	200.00

Page Subtotal

400.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

5425.00

Enter this total on
line 3a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150313-0

2. Committee Name Committee to Elect Joseph Rivet

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 1 Name: Bay City Democrat Address: 309 Ninth Street Bay City MI 48708 <input type="checkbox"/> Fund Raiser	Purpose: <u>Ticket donation</u> Expenditure Code <u>CC</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	08/28/2008	111.83
Expenditure # 2 Name: Postmaster Address: Bay City MI 48708 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> Expenditure Code <u>MA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	09/02/2008	210.00
Expenditure # 3 Name: Postmaster Address: Bay City MI 48708 <input type="checkbox"/> Fund Raiser	Purpose: <u>stamps</u> Expenditure Code <u>MA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	09/05/2008	84.00
Expenditure # 4 Name: Jacobs for Supervisor Address: 4660 Willow Dr. Bay City MI 48706 <input type="checkbox"/> Fund Raiser	Purpose: <u>Ticket Purchase</u> Expenditure Code <u>TC</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	09/17/2008	25.00
Expenditure # 5 Name: Stein Haus Address: Water Street Bay City MI 48708 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>fund raiser cost</u> Expenditure Code <u>FE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	09/18/2008	530.76
Subtotal this page			961.59
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150313-0

2. Committee Name Committee to Elect Joseph Rivet

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 6 Name: Unclaimed Freight Address: 705 E. Midland Bay City MI 48706 <input type="checkbox"/> Fund Raiser	Purpose: <u>Sign Posts/Supplies</u> Expenditure Code <u>SA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	09/20/2008	86.42
Expenditure # 7 Name: Bay County Democratic Party Address: 4538 Greenfield Bay City MI 48706 <input type="checkbox"/> Fund Raiser	Purpose: <u>ticket</u> Expenditure Code <u>PP</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	09/25/2008	100.00
Expenditure # 8 Name: Meijer Address: 2908 E. Wilder Bay City MI 48706 <input type="checkbox"/> Fund Raiser	Purpose: <u>food for volunteers</u> Expenditure Code <u>NF</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	09/28/2008	90.14
Expenditure # 9 Name: Postmaster Address: Bay City MI 48708 <input type="checkbox"/> Fund Raiser	Purpose: <u>mailing</u> Expenditure Code <u>MA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	09/28/2008	1338.77
Expenditure # 10 Name: Richey (NGMC) Address: 1190 Woodwind Trail Haslett MI 48840 <input type="checkbox"/> Fund Raiser	Purpose: <u>labels</u> Expenditure Code <u>CO</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/01/2008	175.00
Subtotal this page			1790.33
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150313-0

2. Committee Name Committee to Elect Joseph Rivet

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 11 Name: RT Printing Address: 4778 Main Millington MI 48746 <input type="checkbox"/> Fund Raiser	Purpose: <u>literature</u> Expenditure Code <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/01/2008	854.20
Expenditure # 12 Name: Kildee for Congress Address: P.O. Box 317 Flint MI 48501 <input type="checkbox"/> Fund Raiser	Purpose: <u>Tickets</u> Expenditure Code <u>TC</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/16/2008	25.00

Subtotal this page

Grand Total of all Schedules 1B
(Complete on last page of Schedule)

879.20

3631.12

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150313-0

2. Committee Name Committee to Elect Joseph Rivet

- USE A SEPARATE SHEET FOR EACH EVENT-

3. Date Event Was Held <u>09/16/2008</u> Month Day Year	4. Number of Individuals Attending or Participating (whichever is greater) <u>75</u>	5. Type of Fund Raising Activity <u>reception</u>	6. Address and Name (If any) of the place where the activity was held <u>Stein Haus 3</u> Bay City MI <u>48706</u> <input type="checkbox"/> Private Residence
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7. Total Contributions of \$20.00 or less 325.00

8. Total Contributions of \$20.01 or more 2975.00

9. SUBTOTAL (Add lines 7 and 8) 3300.00

10. Other Receipts 0.00

11. Gross Receipts (Add lines 9 and 10) 3300.00

12. Total Cost of Event* 740.76

*Includes In-Kind Contributions and All
Expenditures Made For the Event

13. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

DEMOCRAT

Joseph Rivet

LEADERSHIP
COMMITMENT
VISION

October 30, 2008

Ms. Cynthia Luczak
Bay County Clerk
515 Center Avenue
Bay City, MI 48706

Dear Ms. Luczak:

The Committee to Elect Joseph Rivet has received two checks since the last campaign reporting period expired in excess of one hundred dollars. I am notifying you of those receipts. They are:

IBEW -Cope
900 Seventh Street
Washington D.C. 20001

\$1000.00

Received: 10.30.08

Michigan Regional Council of Carpenters PAC
3800 Woodward
Detroit, MI 48201

\$ 500.00

Received: 10.29.08

Thank you for your attention.

Sincerely,

Joseph Rivet